

1 FW 2122 \$

IMEC193.001AUS

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Miranda, et al.
Appl. No. : 09/760,129
Filed : January 12, 2001
For : SYSTEM AND METHOD FOR
OPTIMIZING SOURCE CODE
Examiner : Andre R. Fowlkes
Group Art Unit : 2122
Customer No. : 20,995

CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

December 14, 2004

(Date)

Eric M. Nelson, Reg. No. 43,829

AMENDMENT AND RESPONSE TO OFFICE ACTION

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

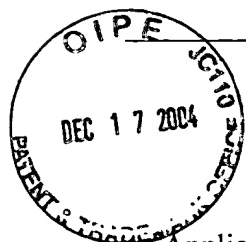
In response to the Office Action of July 15, 2004, Applicants submit the following amendment and remarks for consideration in connection with the above-captioned application. **Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper. **Remarks** begin on page 8 of this paper.

12/20/2004 DEMMANU1 00000011 09760129

01 FC:1201 200.00 OP
02 FC:1202 50.00 OP

12/20/2004 DEMMANU1 00000011 09760129

03 FC:1252 450.00 OP



AMENDMENT / RESPONSE TRANSMITTAL

Applicant : Miranda, et al.
 App. No. : 09/760129
 Filed : January 12, 2001
 For : SYSTEM AND METHOD
 FOR OPTIMIZING SOURCE
 CODE
 Examiner : Andre R. Fowlkes
 Art Unit : 2122

CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

December 14, 2004

(Date)

Eric M. Nelson, Reg. No. 43,829

Mail Stop Amendment

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing in the above-identified application are the following enclosures:

(X) Amendment and Response to Office Action in 14 pages.

The fee has been calculated as shown below:

FEE CALCULATION				
FEE TYPE		FEE CODE	CALCULATION	TOTAL
Total Claims	38 - 37 = 1	1202 (\$50)	1 x 50 =	\$ 50
Independent Claims	5 - 4 = 1	1201 (\$200)	1 x 200 =	\$200
1 Month Extension		1251 (\$120)		\$
2 Month Extension		1252 (\$450)		\$450
3 Month Extension		1253 (\$1,020)		\$
			TOTAL FEE DUE	\$700

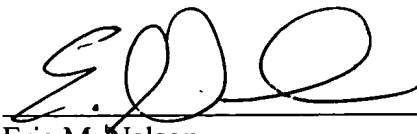
(X) An extension of time is hereby requested by payment of the appropriate fee indicated above.

- (X) A check in the amount of \$700 is enclosed.
- (X) Return prepaid postcard.
- (X) Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.

Respectfully submitted,

KNOBBE, MARTENS, OLSON & BEAR, LLP

Dated: 12/14/2004

By: 
Eric M. Nelson
Registration No. 43,829
Attorney of Record
Customer No. 20,995
(619) 235-8550